

January 2003

Seed Capital Investment Program Full Application Form

Date Submitted _____

File Number _____

1. Company Name _____
2. Contact Person _____ Title _____
3. Company Address _____

4. Phone _____ Fax _____
E-mail _____
5. Tax I.D. Number _____
6. Year Company Established: _____
7. How did you find out about the Authority? _____

Loan Request Information			
Project Cost		Funding Sources	
Purchase of Land	\$ _____	Cash Down Payment	\$ _____
New Construction	\$ _____	Cash Injection	\$ _____
Renovation / Remodeling	\$ _____	Seller Financing	\$ _____
Purchase Inventory	\$ _____	Other* _____	\$ _____
Trade Payables	\$ _____	_____	\$ _____
Working Capital	\$ _____	_____	\$ _____
Refinancing Existing Debt	\$ _____	_____	\$ _____
Other _____	\$ _____	Loan Amount Requested	\$ _____
Other _____	\$ _____	Total Source of Funds	\$ _____
		Source of Cash:	
		<input type="checkbox"/> Business	\$ _____
		<input type="checkbox"/> Personal	\$ _____
		<input type="checkbox"/> Gift	\$ _____
		Other _____	\$ _____
Total Funds Needed	\$ _____		

Requested Repayment Terms:

*Have you applied for loans and/or assistance from other sources regarding this project, if so, please list the source and amount of each request.

Financial Information

A. List the collateral available for security:

Descriptions	Orig. Cost	Book Value	Liens
Land and Buildings Machinery & Equipment Accounts Receivable Inventory Other(provide description)			

B.

Bank and Trade References			
<u>Deposits</u>			
Bank: _____	Acct No: _____	Contact: _____	Telephone: _____
Bank: _____	Acct No: _____	Contact: _____	Telephone: _____
Bank: _____	Acct No: _____	Contact: _____	Telephone: _____
<u>Loans</u>			
Bank: _____	Acct No: _____	Contact: _____	Telephone: _____
Bank: _____	Acct No: _____	Contact: _____	Telephone: _____
Bank: _____	Acct No: _____	Contact: _____	Telephone: _____

Business Indebtedness

Please furnish information on all business debts, notes, and mortgages

To Whom Payable	Original Amount	Date Of Loan	Present Balance	Rate of interest	Maturity Date	Monthly Payment	Collateral

Project Information (Probably from Business Plan)

Briefly describe the history of your company. What are your company's goals?

Describe the stage of development of your proposed project or company. Will further research and development be required for your product or service? If yes, please explain.

Discuss the technology involved in your project. How will this technology provide your company with a competitive advantage in the industry?

Where will the company's operations be located? Why did you choose the particular location of your operations? How large is your facility? Number of employees?

Detail the employment your company will provide. What type of jobs will be created in your company, and how many employees will be hired at each level?

Provide a detailed explanation of the industry in which your company will operate. Include a discussion of your competitors, their market share, dollar size and the market niche your company will address.

III. Management Information

List the names and positions of all key officers and senior technical staff (if resumes were not included in the business plan, please attach):

<u>Name/Title</u>	<u>SS #</u>	<u>Compensation</u>	<u>% Owned</u>
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List the names and positions of all key owners, partners, directors, or stockholders.

<u>Name/Title</u>	<u>Compensation</u>	<u>% Owned</u>
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List the names of all attorneys, accountants appraisers, packagers, agents or any other parties engaged by or on behalf of the proposed borrower.

<u>Name/Title</u>	<u>Compensation</u>	<u>% Owned</u>
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Declarations of Principal Owners, Officers, Directors		
Please answer the following questions as they apply to the applicant company, each officer, each director, and each owner of 20% or more of the applicant company. For each "yes" answer attach a separate exhibit providing a detailed explanation.		
1. Are any involved in any claim or lawsuit?	<input type="checkbox"/> yes	<input type="checkbox"/> No
2. Are any federal, state, or local taxes delinquent?	<input type="checkbox"/> yes	<input type="checkbox"/> No
3. Are any liable under contingency agreements?	<input type="checkbox"/> yes	<input type="checkbox"/> No
4. Have any ever been involved in bankruptcy or insolvency proceedings?	<input type="checkbox"/> yes	<input type="checkbox"/> No
5. Do you have outstanding judgments?	<input type="checkbox"/> yes	<input type="checkbox"/> No
6. Have any ever had property foreclosed upon or given title or deed in lieu of foreclosure?	<input type="checkbox"/> yes	<input type="checkbox"/> No
7. Have any ever requested government financing before?	<input type="checkbox"/> yes	<input type="checkbox"/> No
8. Is this loan request under consideration at any other financial institution at this time/	<input type="checkbox"/> yes	<input type="checkbox"/> No
9. Have any ever been charged with or arrested for any criminal offense other than a minor motor Vehicle violation	<input type="checkbox"/> yes	<input type="checkbox"/> No
10. are any presently under indictment, parole or probation	<input type="checkbox"/> yes	<input type="checkbox"/> No
11. Are your operations subject to any state or federal environmental and/or occupational safety regulations that require a permit, license, testing or regular inspection?	<input type="checkbox"/> yes	<input type="checkbox"/> No
12. Is a director of the Arkansas Science and Technology Authority associated with your enterprise in any manner?	<input type="checkbox"/> yes	<input type="checkbox"/> No

CheckList

- ☐ Complete Business Plan
- ☐ Articles of Incorporation
- ☐ Personal Tax Returns
- ☐ Business Tax Returns (if applicable)
- ☐ Business Fiscal Year End Financial Statements for the past three years (or projected statements for the first three years)

To the best of our knowledge, the data and information contained in this application is true and correct. We realize that additional information may be requested by the Authority from myself and other sources for evaluation purposes. We agree to comply with all applicable Federal and State laws and regulations.

(signature and title of authorized personnel) date

(signature and title of authorized personnel) date

(signature and title of authorized personnel) date

(signature and title of authorized personnel) date